Date: 01/04/10

DIVIDENDS REMITTED TO THE COURT

Page:

Case Number 08-90142 - FAVER, TERRY D

Creditor	Claim No.	Amount Allowed	Amount Paid
BancorpSouth P. O. Box 4360 Tupelo, MS 38803	000003	27.88	4.11
Remittance Total		27.88	4.11

Stephen J. Zayler, Trustee

B 10 (Official Form 10) (12/07)			
UNITED STATES BANKRUPTCY COURT Eastern District of Texas		PROOF OF CLAIM	
Name of Debtor: Terry and Sonya Faver	Case Num	40	
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencemen	08-901	1 request for payment of an	
Name of Creditor (the person or other entity to whom the debtor owes money or property):		this box to indicate that this	
Bancorp South Name and address where notices should be sent:		claim amends a previously filed	
	claim.		
BancorpSouth P. O. Box 4360		Court Claim Number: (If known)	
Tupelo, MS 38803		n)	
Telephone number: (662) 620-3644		Filed on:	
Name and address where payment should be sent (if different from above):			
	anyone relating	his box if you are aware that else has filed a proof of claim to your claim. Attach copy on the giving particulars.	
elephone number:		Check this box if you are the debtor or trustee in this case.	
Amount of Claim as of Date Case Filed: \$ 27.88		5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories,	
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.			
If all or part of your claim is entitled to priority, complete item 5.	check ti	e box and state the	
Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		Specify the priority of the claim.	
2. Basis for Claim: <u>overdrawn checking acct</u> (See instruction #2 on reverse side.)		Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).	
3. Last four digits of any number by which creditor identifies debtor: 9499		salaries, or commissions (up	
3a. Debtor may have scheduled account as:		to \$10,950*) earned within 180 days before filing of the bankruptcy	
(See instruction #3a on reverse side.) 4. Secured Claim (See instruction #4 on reverse side.)		or cessation of the debtor's	
Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.		s, whichever is earlier – 11 3507 (a)(4).	
Nature of property or right of setoff: Real Estate Motor Vehicle Other		tions to an employee benefit U.S.C. §507 (a)(5).	
Describe:		Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or	
Value of Property: \$ Annual Interest Rate%			
Amount of arrearage and other charges as of time case filed included in secured claim,		d use - 11 U.S.C. §507	
if any: \$Basis for perfection:	(a)(7).		
Amount of Secured Claim: \$ Amount Unsecured: \$		Taxes or penalties owed to governmental units – 11 U.S.C. §507 (a)(8).	
. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.		Other - Specify applicable paragraph	
Documents: Attach reducted copies of any documents that support the claim, such as promissory notes, purchase		S.C. §507 (a)().	
rders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of security interest. You may also attach a summary. (See definition of "redacted" on reverse side.)		Amount entitled to priority:	
OO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER CANNING.			
		*Amounts are subject to adjustment on	
f the documents are not available, please explain:		4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.	
Date: O6/24/2008 Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the c		FOR COURT USE ONLY	
06/24/2008 other person authorized to file this claim and state address and telephone number if different from t	reditor or he notice		

Date:
06/24/2008

Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.

BancorpSouth by: Che Clay, AVP

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or impresonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.